

Statement of Deficiencies

8817-G: Annual Training

Not Met

Findings/Corrections

8817 G. 2. (a.-g.) The Provider failed to document that direct care staff, [co-directors], received training on an annual basis in:

- a) facility's policies and procedures;
- b) emergency and evacuation procedures;
- e) resident care services (ADLs and IADLS).

8817 G. 5.Co-directors, who are also direct care staff, failed to sign a statement of understanding certifying that annual training had occurred.

8821-G: Critical Incidents

Not Met

Findings/Corrections

8821 G. 3. g. The Provider failed to document its compliance with all of the procedures of 8821.G.3.a.-f. for each incident, and failed to keep such documentation (including any written reports or notification) in the resident's file for incidents which resulted in death of a resident, involved abuse or neglect of a resident, or entailed a serious threat to the resident's health, safety or well-being with a separate copy of all such documentation kept in the provider's administrative file.

8827-F: Meals

Not Met

Findings/Corrections

8827 F. 1. The facility's menus failed to be reviewed and approved by a nutritionist or dietician to assure their nutritional appropriateness for the setting's residents.

Menus are not dated and some signatures of the dietician are copies instead of original signatures.